

DECLARATION POWER OF ATTORNEY FOR PAPER APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plural names are listed below) of the subject matter for which a patent is sought on the invention entitled:

“Estrogenic estra -1,3,5(10)-trienes with differential effects on the alpha and beta estrogenreceptors, having a linear hydrocarbon chain of from 5-9 carbon atoms in position 11”

the specification of which

[CHECK ONE]

[] is attached hereto

[] was filed on _____ as Application Serial No.

_____ and was amended on _____

[if applicable]

[X] as filed under the Patent Cooperation Treaty on **18/11/99** Serial **EP99/09053** , The United States of America being designated.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined Title 37, Code of Federal Regulations Section 1.56(a)

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign applications(s) for patent or inventor's certificate having a filing date before that of the application(s) on which priority is claimed:

Prior Foreign Application(s)		Day/Month/Year filed	Priority claimed
<u>98203914.1</u>	<u>EP</u>	<u>20/ 11 / 1998</u>	<u>X</u> Yes ___ No
Number	Country	Day/Month/Year filed	___ Yes ___ No
_____	_____	_____	___ Yes ___ No
Number	Country	Day/Month/Year filed	___ Yes ___ No
_____	_____	<u>/ /</u>	___ Yes ___ No
Number	Country	Day/Month/Year filed	___ Yes ___ No

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application(s) in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose to the patent and Trademark

Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application.

(U.S. Serial No.) (Filing date) (Status-patented, pending, abandoned)

(U.S. Serial No. (Filing date) (Status-patented, pending, abandoned)

2 And I hereby appoint as principal attorney, William M. Blackstone, Registration No. 29,772, and Michael G. Sullivan, Registration No. 35,377.

Please address all communications to:

William M. Blackstone
AKZO NOBEL
1300 Piccard Drive #206
Rockville, MD 20850-4373

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00 Full name of sole or first inventor Loozen, H.J.J.

Hubert Jan Jozef

Inventor's signature _____ Date 2/5/2001

Citizenship Dutch

Residence and P.O. Address Meerhoek 602 5403 AC Uden NLX
The Netherlands

2-00 Full name of second joint inventor Schoonen W.G.E.J.

Wilhelmus Gerardus Eduardus Joseph

Inventor's signature _____ Date 2/5/2001

Citizenship Dutch

Residence and P.O. Address Parklaan 16 5345 BV Oss
The Netherlands NLX

Full name of third joint inventor _____

Inventor's signature _____ Date _____

Citizenship _____